



HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, HONOLULU, HAWAII 96813

or P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: (808) 587-0460 FAX: (808) 587-0470

email: ethics@hawaiiethics.org

Web site: www.hawaii.gov/ethics

THIS SPACE FOR OFFICE USE ONLY

13 APR -2 AIO 58

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

STATE OF HAWAII
STATE ETHICS COMMISSION

PART I LOBBYIST			
NAME (Last)	(First)	(Middle)	TELEPHONE
Chin	Douglas	Shih-Ging	(808) 523-2576
MAILING ADDRESS (Street)			FAX (808) 523-0842
ASB Tower, Suite 2200, 1001 Bishop Street			EMAIL dchin@carlsmith.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)			TELEPHONE
Carlsmith Ball LLP			(808) 523-2576
MAILING ADDRESS (Street)			FAX (808) 523-0842
ASB Tower, Suite 2200, 1001 Bishop Street			EMAIL www.carlsmith.com
(City)	(State)	(Zip Code)	
Honolulu	Hawaii	96813	

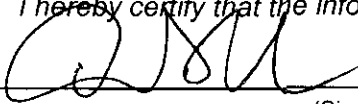
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate)		TELEPHONE
Kohler-Leland		(907) 562-5531
MAILING ADDRESS (Street)		FAX (907) 562-4086
12800 Huffman Circle		EMAIL
(City)	(State)	(Zip Code)
Anchorage	AK	99516
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT		TELEPHONE
Meera Kohler		(907) 565-5531
MAILING ADDRESS (Street)		FAX (907) 562-4086
12800 Huffman Circle		EMAIL
(City)	(State)	(Zip Code)
Anchorage	AK	99516

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|---|---|---|
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input checked="" type="checkbox"/> Tourism & Recreation |
| <input checked="" type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | _____ |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.



(Signature of Lobbyist)

3/18/13

(Date)

PART V AUTHORIZATION TO LOBBY

NAME

TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED

Meera Kohler

NAME OF ORGANIZATION (if applicable)

Kohler-Leland

TELEPHONE

(907) 565-5531

MAILING ADDRESS (Street)

12800 Huffman Circle

FAX (907) 562-4086

EMAIL

(City)

Anchorage

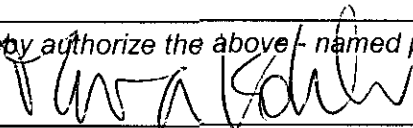
(State)

AK

(Zip Code)

99516

I hereby authorize the above-named person to engage in lobbying activities on behalf of the undersigned.



(Signature of Authorizing Officer or Person Represented)

3/25/2013

(Date)